							BEST AVAILABLE COPY							
DATENT ADDITION FOR							Application or Docket Number							
	PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000													
CLAIMS AS FILED - PART I							09740345							
(Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN				
TOTAL CLAIMS			1/		Bergara a primara menter		RATE FEE		OR SMALL ENTITY					
FOR			NUMBER FILED		NUMBER EXTRA			SIC FEE			BASIC FEE			
TOTAL CHARGEABLE CLAIMS			1.5 minus 20=		• 6		VE O		-	1				
INDEPENDENT CLAIMS			9 minus 3 =		. Ø		-	X\$ 9=		OR	X\$18=	90		
MULTIPLE DEPENDENT CLAIM P			10-		- CX			X40=		OR	X80=			
							+	135≖		OR	+270=	210		
* If the difference in column 1 is less than zero, enter "0" in column 2						T	OTAL		ОЯ	TOTAL	100			
CLAIMS AS AMENDED - PART II									ALTERY!	~~	OTHER			
4		(Column 1) CLAIMS		(Colur HIGH	EST	(Column 3)		MALL	ADDI-	OR I	SMALL			
AMENDMENT A		REMAINING AFTER		PREVIO		PRESENT EXTRA	F	RATE	TIONAL		RATE	ADDI- TIONAL		
	Total	AMENDMENT . i.i. U	Minus	PAID	FOR	10			FEE			FEE		
	Independent	. 1	Minus	0	<u>-></u>	= /7	L ^x	(\$ 9=		OR	X\$18=	342		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT		S. CLAIM	<u> </u>	>	(40=		OR	X80=					
								135=		OR	+270=			
÷.								TOTAL		OR	TOTAL ADDIT, FEE	242		
ADDIT FEE (Column 1) (Column 2) (Column 3)										•	AUUII, FEEI	7		
AMENOMENT B		CLAIMS REMAINING		HIGH	BEA	PRESENT			ADDI-			ADDI-		
		AFTER AMENDMENT		PREVIO		EXTRA	RATE		TIONAL FEE		RATE	TIONAL FEE		
	Total	2/	Minus	1. 17	4	=	×	\$9=		OR	X\$18=			
	Independent	. 7	Minus	-6	5	=	×	40=		OR	X80=			
	FIRST PRESE	NTATION OF MI	LTIPLE DEPENDENT CLA			um		105			.070			
								135= TOTAL		OR	+270= TOTAL			
(5 /14/			7.1				IT. FEE		OR ,	ADDIT, FEE			
		(Column 1) CLAIMS		(Colum		(Column 3)								
AMENDMENT C		REMAINING AFTER		NUME PREVIO	USLY	PRESENT EXTRA	RA	ATE	ADDI- TIONAL		RATE	ADDI- TIONAL		
	Total	AMENDMENT		PAID F					FEE			FEE		
	Total Independent	- 20	Minus Minus	1	\mathcal{A}	3	X	\$ 9=		OR	X\$18=			
		NTATION OF MI		PENDENT	CLAIM	-	x	40=		OR	X80=			
							+1	35=		OR	+270=			
• 1	f the entry in colur f the "Highest Nur	nn 1 is less than th	e entry in col	umn 2, write	"0" in colu	umn 3, 1 20. entor "20."	<u> </u>	TOTAL		OR I	TOTAL			
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														
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FORM PTO-875 (Rev. 8/00)